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Sanitary Report

OF

THE CITY OF ST. JOHN

FOR

THE YEARS 1896 AND 1897.

LONDON:
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1898.

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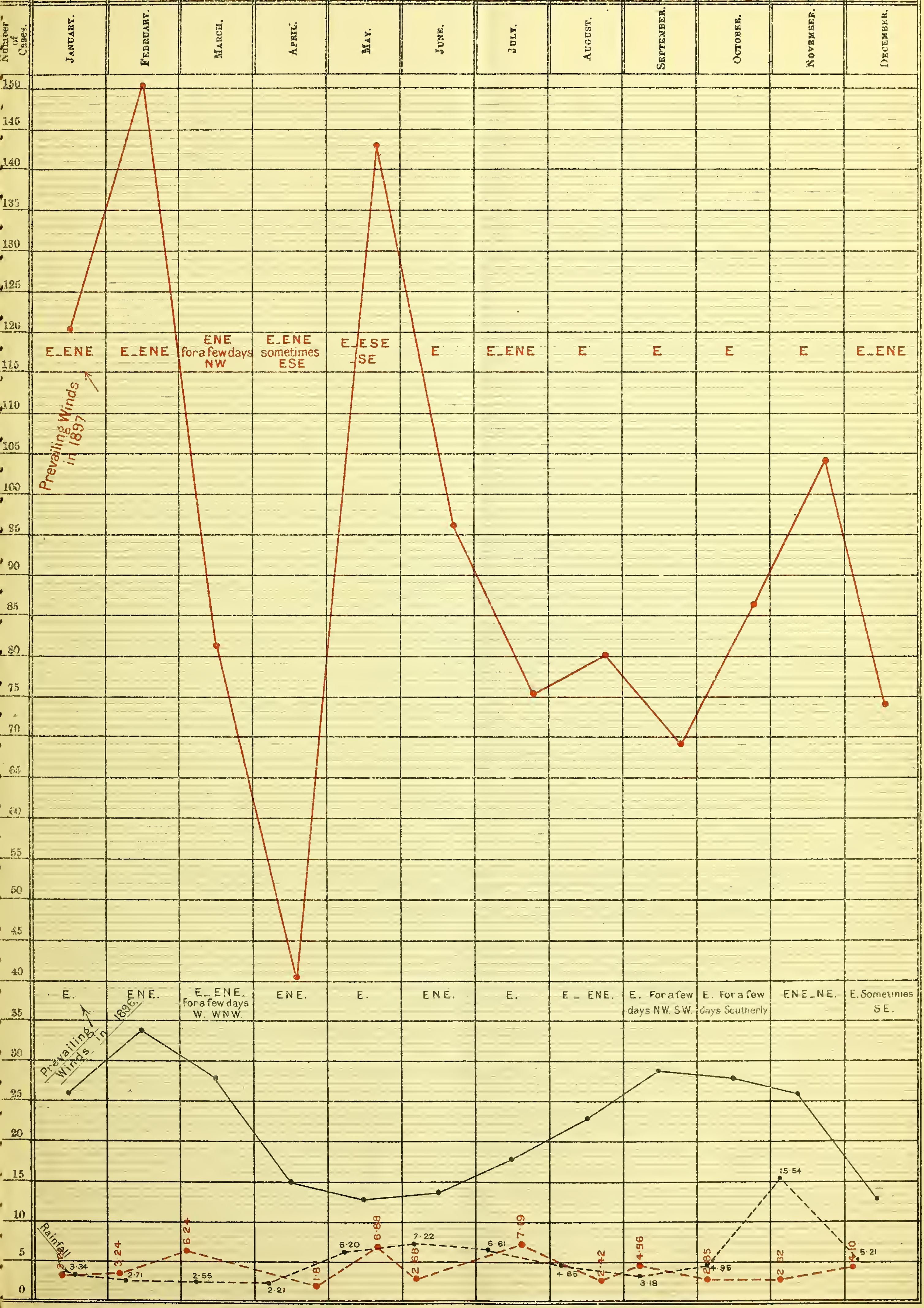
FEVERS.

CHART I.

RED CHART = 1897 ; BLACK = 1896. THE RAINFALL IS MARKED IN INCHES.

	JANUARY.		FEBRUARY.		MARCH.		APRIL.		MAY.		JUNE.	
Temperature of Air	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9a.m.	3p.m.	9 a.m.	3 p.m.
	78·8	72·4	78·1	71·3	79·	71·4	79·8	71·9	81·9	74·8	83·3	76·6
	78·8	82·8	78·5	82·5	78·7	82·2	80·8	84·	82·3	83·6	82·6	84·3
Dew Point.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9a.m.	3p.m.	9 a.m.	3 p.m.
	67·2	68·5	66·7	66·2	66·2	66·2	66·5	66·	70·2	69·9	72·2	71·6
	68·4	68·	66·7	65·6	67·9	67·6	68·7	67·8	70·9	70·5	70·8	70·8

	JULY.		AUGUST.		SEPTEMBER.		OCTOBER.		NOVEMBER.		DECEMBER.	
Temperature of Air	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.
	83·3	76·8	83·5	77·2	84·6	77·6	83·9	77·	80·5	74·1	80·4	74·4
	83·3	85·4	84·2	86·9	84·3	86·7	84·4	86·7	82·8	84·9	81·3	83·6
Dew Point.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.
	72·5	72·4	73·1	72·6	72·8	72·4	72·5	72·2	69·8	69·9	70·5	70·7
	72·	72·	72·2	72·1	72·4	71·8	71·9	71·9	71·3	71·	70·1	70·3

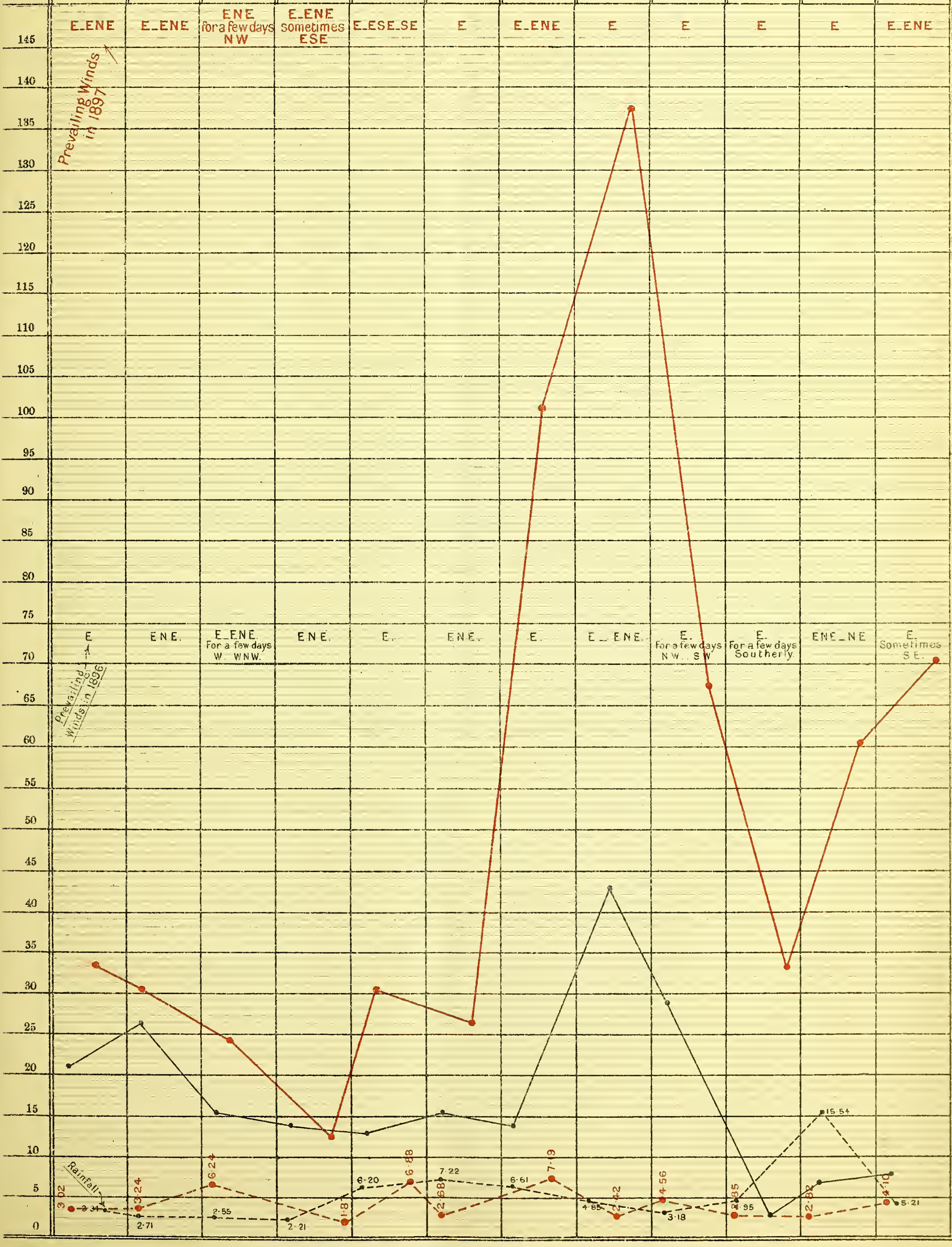


PULMONARY DISEASES.

The red figures relate to 1897, the black to 1896.

CHART 2.

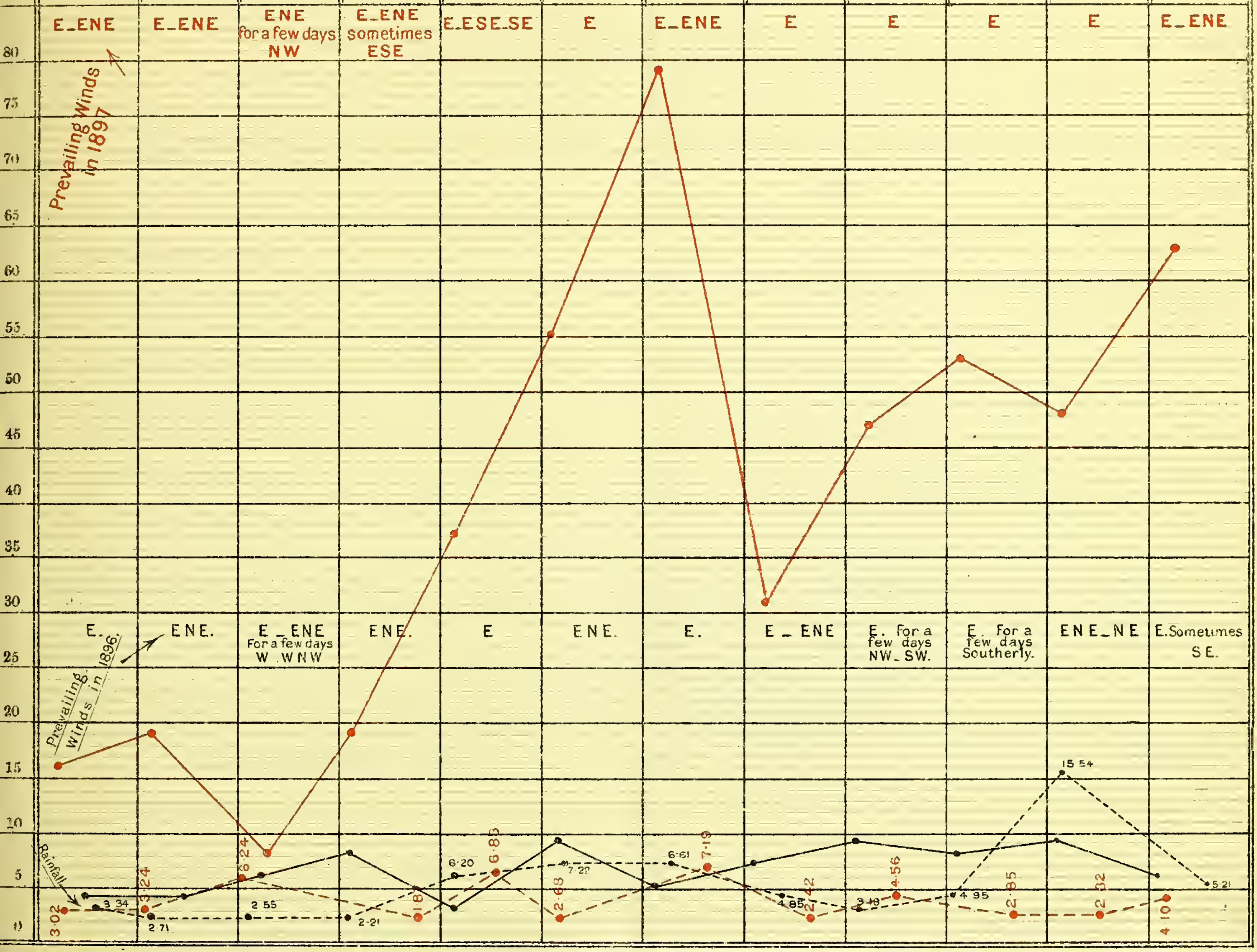
Number of Cases.	January.		February.		March.		April.		May.		June.		July.		August.		September.		October.		November.		December.	
Temperature of Air	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9a.m.	3p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.
	78·8	72·4.	78·1	71·3	79·	71·4	79·8	71·9	81·9	74·8	83·3	76·6	83·3	76·8	83·5	77·2	84·6	77·6	83·9	77·	80·5	74·1	80·4	74·4
	78·8	82·8	78·5	82·5	78·7	82·2	80·8	84·	82·3	83·6	82·6	84·3	83·2	85·4	84·2	86·9	84·3	86·7	84·4	86·7	82·8	84·9	81·3	83·6
Dew Point.	9 a.m.	3 p.m.	9 a.m	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m	9a.m.	3p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m	9 a.m.	3 p.m.	9 a.m.	3 p.m.
	67·2	68·5	66·7	66·2	66·2	66·2	66·5	66·	70·2	69·9	72·2	71·6	72·5	72·4	73·1	72·6	72·8	72·4	72·5	72·2	69·8	69·9	70·5	70·7
	68·4	68·	66·7	65·6	67·9	67·6	68·7	67·8	70·9	70·5	70·8	70·8	72·	72·	72·2	72·1	72·4	71·8	71·9	71·9	71·3	71·	70·1	70·3



GASTRO-INTESTINAL DISORDERS. RED FIGURES AND CHART RELATE TO 1897, BLACK TO 1896. RAINFALL MARKED IN INCHES.

CHART 3.

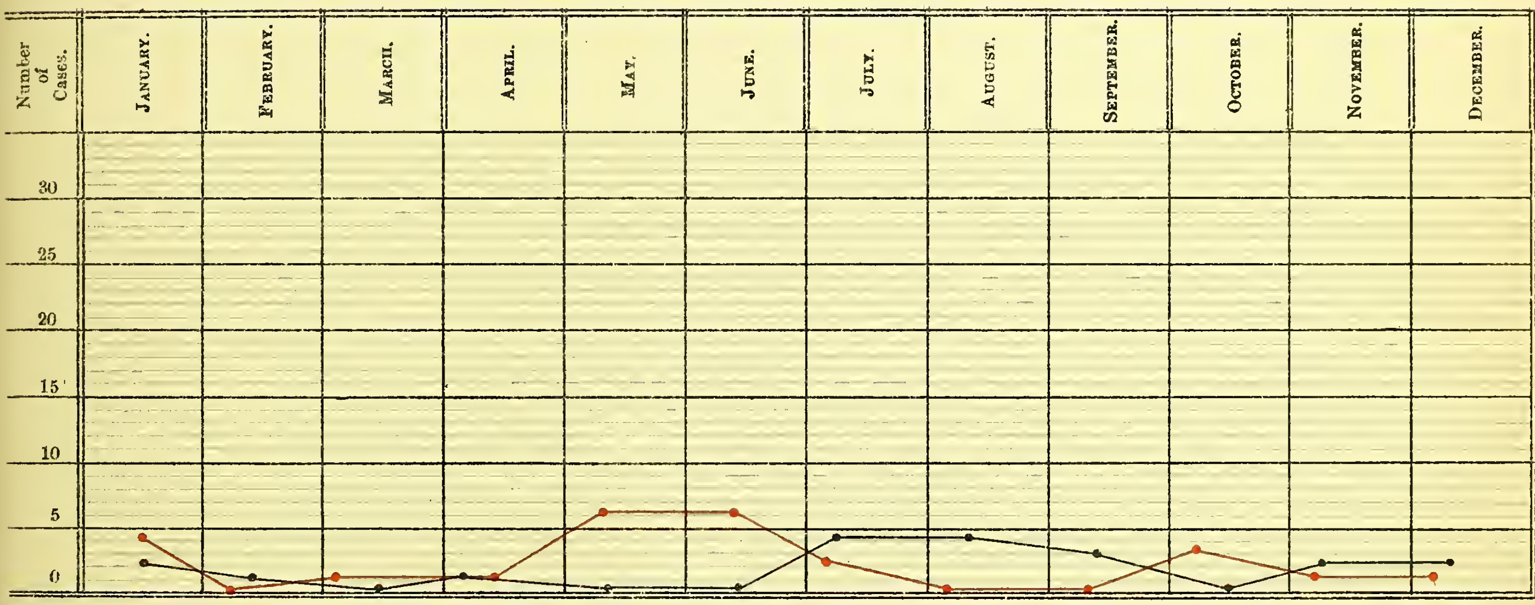
	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9a.m.	3p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.
TEMPERA-TURE OF AIR	78·8	72·4	78·1	71·3	79·	71·4	79·8	71·9	81·9	74·8	83·3	76·6	83·3	76·8	83·5	77·2	84·6	77·6	83·9	77·	80·5	74·1	80·4	74·4
	78·8	82·8	78·5	82·5	78·7	82·2	80·8	84·	82·3	83·6	82·6	84·3	83·3	85·4	84·2	86·9	84·3	86·7	84·4	86·7	82·8	84·9	81·3	83·6
DEW POINT.	9 a.m	3 p.m.	9 a.m	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9a.m.	3p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m.	9 a.m.	3 p.m	9 a.m.	3 p.m.	9 a.m.	3 p.m.
	67·2	68·5	66·7	66·2	66·2	66·2	66·5	66·	70·2	69·9	72·2	71·6	72·5	72·4	73·1	72·6	72·8	72·4	72·5	72·2	69·8	69·9	70·5	70·7
	68·4	68·	66·7	65·6	67·9	67·6	68·7	67·8	70·9	70·5	70·8	70·8	72·	72·	72·2	72·1	72·4	71·8	71·9	71·9	71·3	71·	70·1	70·3
of Cases.	JANUARY.		FEBRUARY.		MARCH.		APRIL.		MAY.		JUNE.		JULY.		AUGUST.		SEPTEMBER.		OCTOBER.		NOVEMBER.		DECEMBER.	



BILIOUS REMITTENT FEVER.

RED TRACING REFERS TO 1897, BLACK TO 1896.

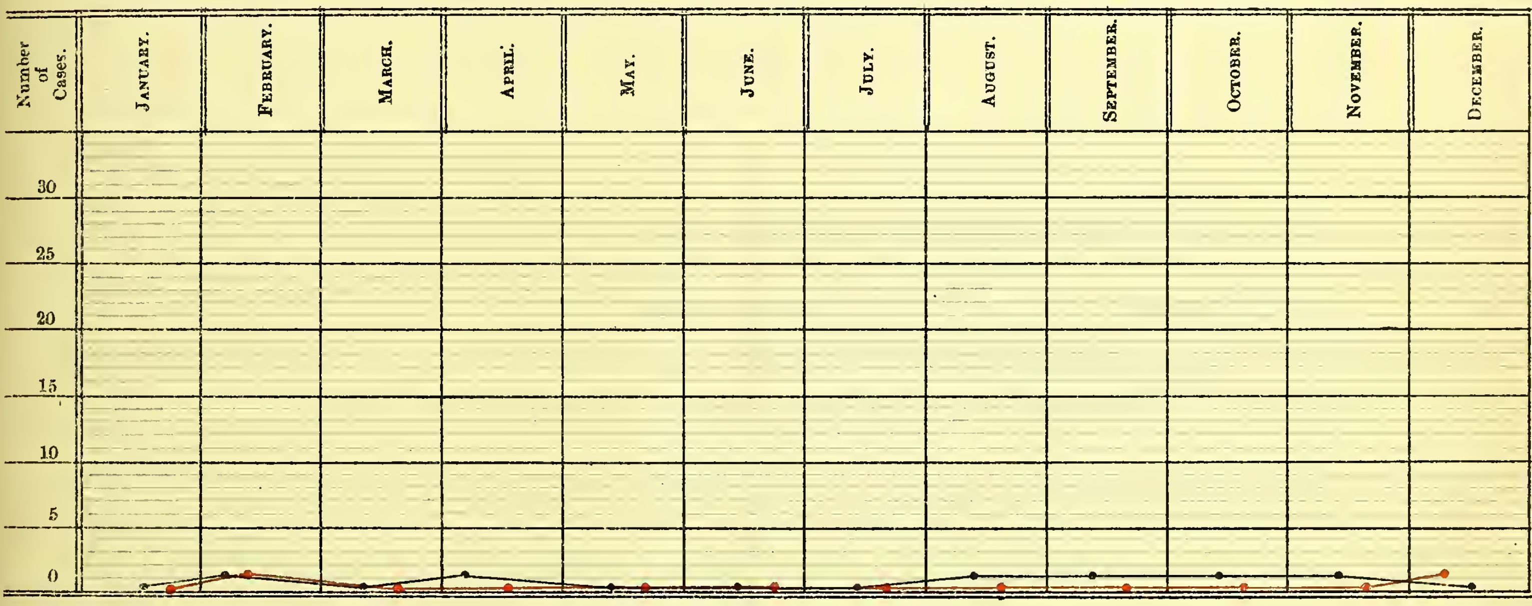
CHART 4.



TYPHOID FEVER.

Red tracing refers to 1897, black to 1896.

CHART 5.



Diseases.	Under 6 months.		6 months to 1 year.		1 to 2 years.		2 to 4 years.		4 to 6 years.		6 to 8 years.		8 to 12 years.		12 to 16 years.		16 to 20 years.		20 to 30 years.		30 to 40 years.		40 to 50 years.		50 to 60 years.		60 to 80 years.		Over 80 years.		Totals of each disease for each year.	
	1896	1897	1896	1897	1896	1897	1896	1897	1896	1897	1896	1897	1896	1897	1896	1897	1896	1897	1896	1897	1896	1897	1896	1897	1896	1897	1896	1897	1896	1897	1896	1897
Bilious Remittent Fever											1			1							1						1				3	1
Puerperal Fever																				1												1
Phthisis.								2												2	2	1						2			2	7
Apoplexy.																					1			2				6	1		2	8
Malarial Fever.		1						1										1										1				4
Diarrhœa.	6	7	1	6	3	8																									10	21
Debility.		7																									1	5		3	1	15
Malnutrition.	1	1	1	1	1	6	1																								4	8
Trismus.		11																														11
Peritonitis.	1																			1						1					1	2
Heart Disease.	1																					4	1	3				2		1	2	10
Pneumonia.			1	2	1	3		1												1											2	7
Bronchitis.	1	7	1	4	2	4	2													1											6	16
Convulsions.				1		1	2																								2	2
Dysentery.			1					1																							1	1
Kidney Disease.							1												1												2	
Cancer.																												1				1
Tetanus.																									1						1	
Totals for each year.	10	34	5	14	7	22	6	5			1			1				1	1	6	4	5	1	5	1	1	2	17	1	4	39	115

Grand Totals.

DEATHS IN 1896 AND 1897.

FEVERS.

CHART A.

RED TRACING AND FIGURES REFER TO 1897, BLACK TO 1896.

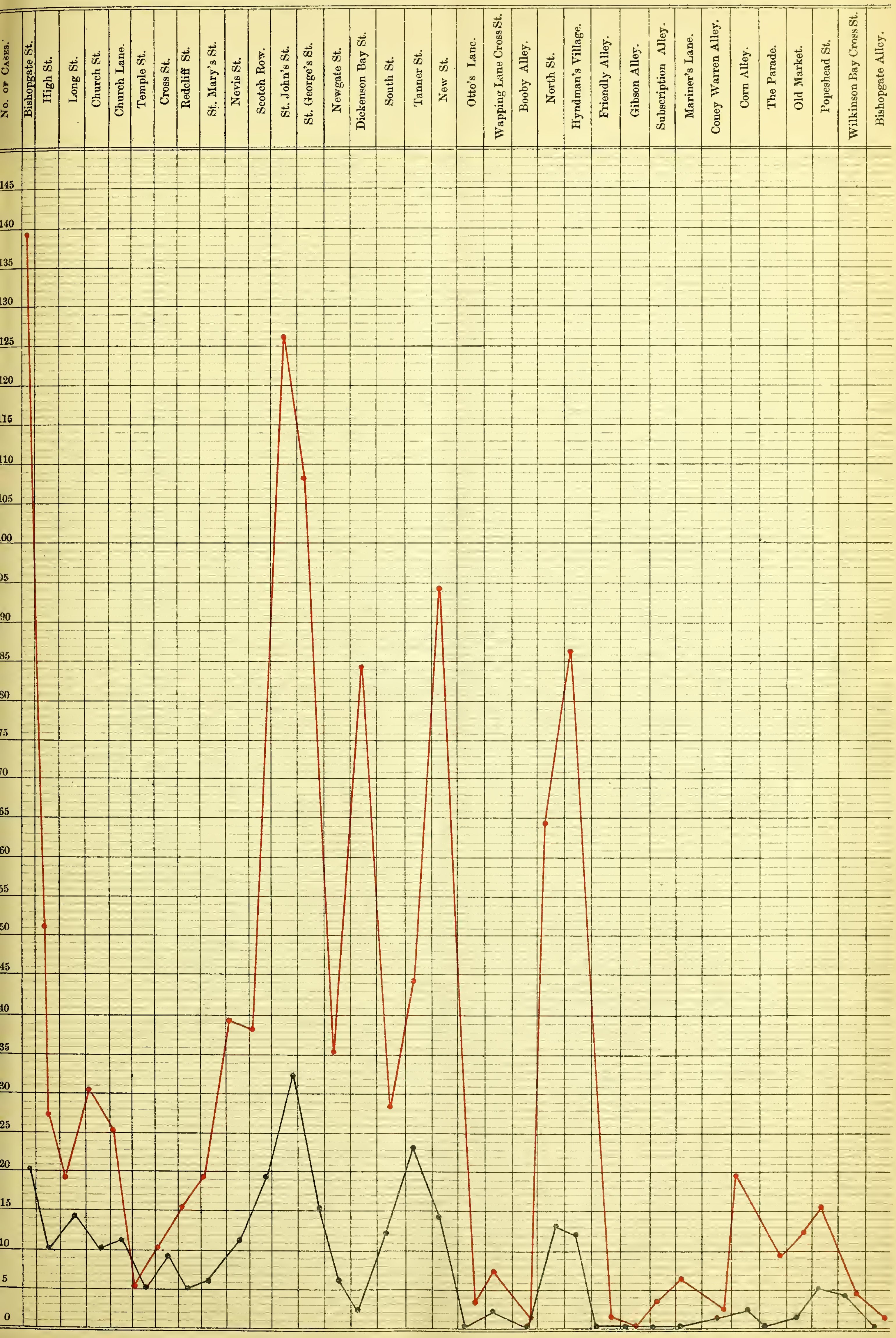
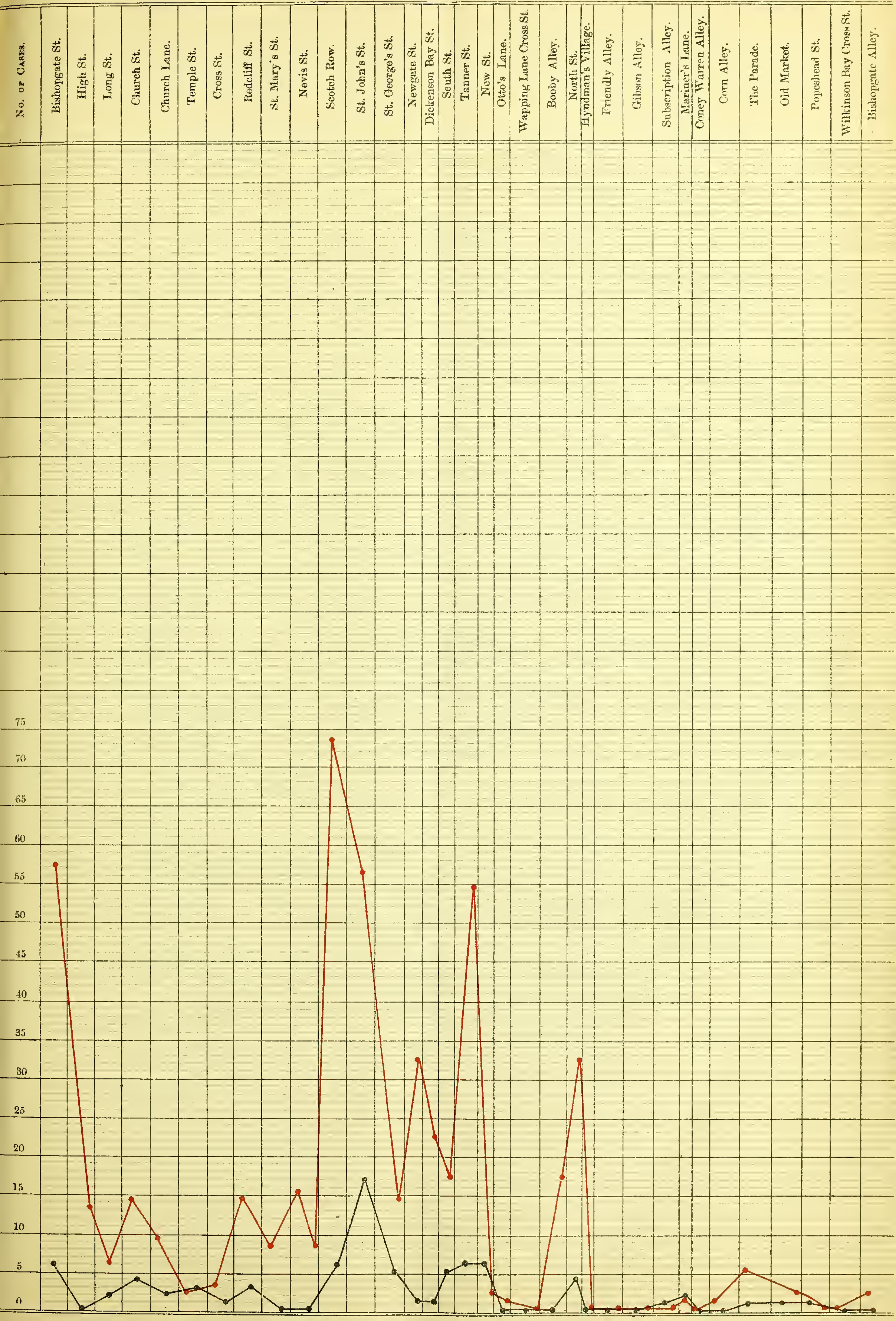


CHART B.

GASTRO-INTESTINAL DISORDERS.

RED TRACING AND FIGURES REFER TO 1897, BLACK TO 1896.



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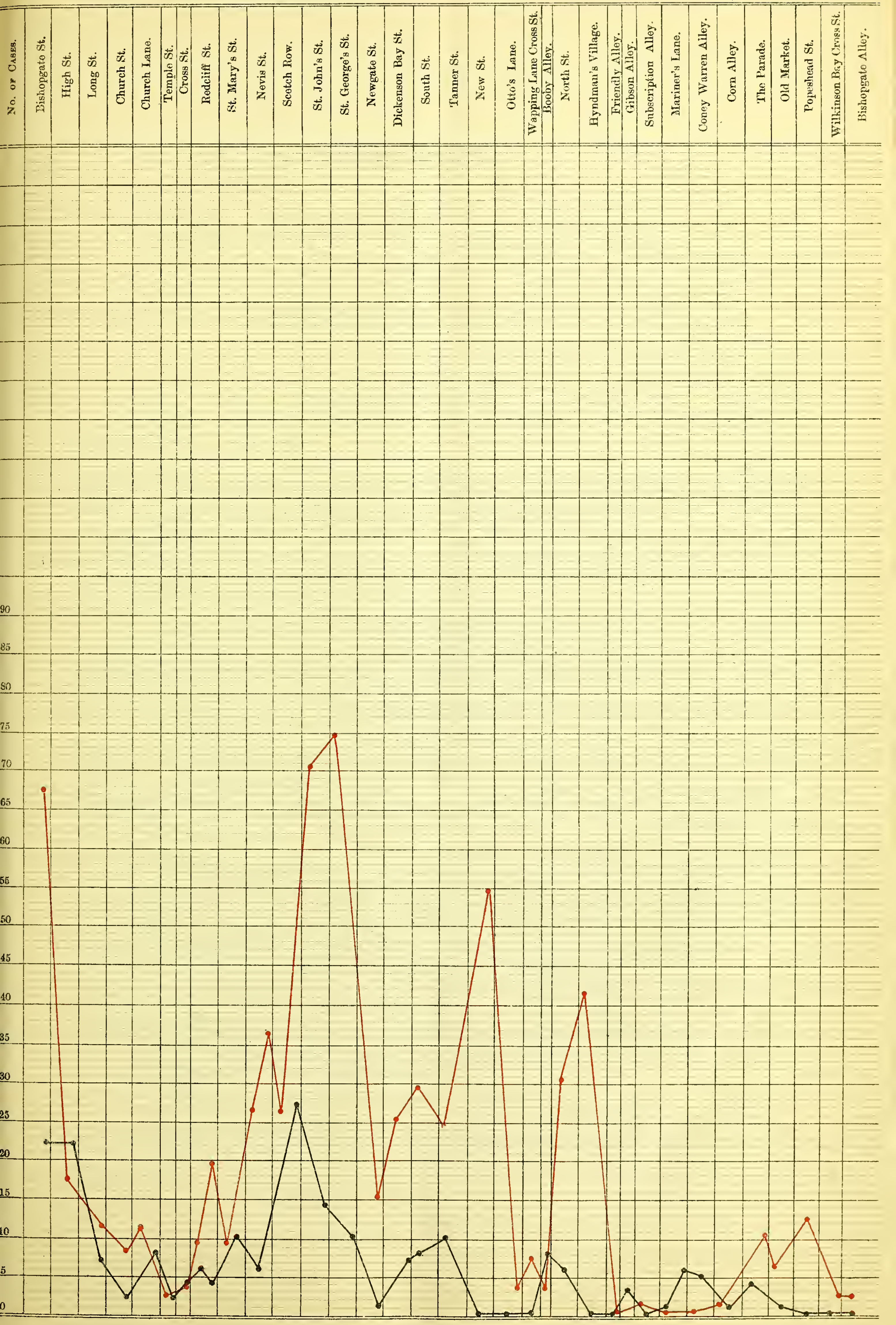
PULMONARY DISEASES.

CHART C. RED TRACING AND FIGURES REFER TO 1897, BLACK TO 1896.



Sanitary Report

OF

THE CITY OF ST. JOHN

FOR

THE YEARS 1896 AND 1897.

Population of St. John's.

According to the census returns for 1891, the population of the City has been estimated at 9,738.

Consideration of the Sanitary condition of the City.

The Sanitary Condition of St. John's has been very good, and the state of the Public Health may be considered to have been, on the whole, satisfactory. The various gutters have been regularly flushed, except during the last few weeks, owing to the drought now prevailing, and the consequent decrease in the water-supply.

The Officers of the Board of Health have been regularly visiting the yards and premises of the inhabitants, and have been using disinfectants generously, where such have been considered necessary.

(A) Public Latrines.

Five public latrines have been erected in the City during the year, three in the South part of St. John's, on Otto's Pasture, and two along Dickenson Bay Street, on the north part of St. John's. These conveniences are being gradually appreciated, and I have no doubt but that, in a short time, they will come to be looked upon as a necessity. It must be remembered that old habits and customs,—and, in this particular instance, unclean and insanitary, not to say, *dirty* habits,—are difficult to be altered; and the Laws of Health, though extremely simple in themselves, need time and patient perseverance, on the part of the Authorities, before an ignorant Public of the Agricultural or labouring Class, whose condition, more than that of any other Class of the Community, the Government are striving to improve, can be made to understand their utility.

(B) Insanitary Streets.

On more than one occasion, I regret to say, complaints had been made to me of the offensive odours arising, chiefly at night, from certain streets in the City. These particular spots are in the neighbourhood of Government House, and along Temple Street, especially where Long and High Streets cross this thoroughfare. These complaints had been immediately brought by me before the Board of Health, and the Superintendent of the Board has done all he could, with the limited means at his disposal, to rectify the nuisances complained of. The Board of Health have suggested certain measures, which, if practicable, will, I trust, tend to make these parts of the City more healthy. It must be borne in mind, however, that much as this Board may wish it, many measures of sanitary importance are of necessity postponed indefinitely, owing to the want of funds at their disposal.

(c) Public Buildings.

The condition of the Public buildings is in a fairly satisfactory state.

(i) Library.

The Public Library is clean and well kept, and I am glad to be able to say that I have no fault to find with regard to the Sanitary state of this Institution.

(ii) Public Market & Cistern.

But I am desirous of drawing His Excellency's attention to the Public Market. This building is not as clean as it should be, especially in the slaughter house. The grounds also, where the animals are tethered, are not kept as clean as they should be ; and the pig-styes are filthy and offensive.

I would also direct His Excellency's attention to the condition of the iron tank, which is in close proximity to the Harbour Master's Office. I found the roof of this cistern rotten and breaking down, and the branches of a " sand-box tree," (the " Hura crepitans " of botanists), growing close to it, were spreading over it. Now, this tree bears a fruit, with many seeds, which are scattered about with some force and *noise* when it is dry,—(hence the name " *crepitans* "). The seeds may thus fall into the cistern, through the broken roof and contaminate the water, and as these seeds produce severe irritation of the stomach and intestines, with consequent vomiting and diarrhœa, it will be evident that water contaminated with these seeds will not be desirable for drinking purposes. I would, therefore, recommend that the roof of this cistern be repaired, and that the branches of the " sand-box tree " overspreading it, be cut down.

(iii) Butchers' Stalls in the City.

It is to be regretted that butchers' stalls should have been opened in the City, in the midst of the people who live in their immediate vicinity. Although I pass and re-pass these stalls daily, I have never yet found cause to complain of them, as public nuisances. All the same, I do not think, on sanitary grounds, especially in a hot climate, that butchers' stalls, in the midst of a closely populated town, are conducive to the Public Health.

(iv) Police Barracks.

I have inspected the water-tanks and the premises of the Police Barracks, and have found that the water has been wholesome, and of good quality, and that the surrounding yards and outhouses have been clean and well looked after.

(D) Water supply of the City.
(*a*) Reservoir water.
(*b*) Cisterns.

The water supply to the City is chiefly from the Reservoir at Gray's Hill, and is of a good and wholesome quality. There are, however, many cisterns in the City which contain rain-water, gathered from the roofs of houses, and I must say that many, if not most, of these cisterns, contain unwholesome water. Wherever there is a cistern much below ground, I would unhesitatingly pronounce its water not only *unwholesome*, but decidedly *dangerous*. In islands, such as these, earth-tremors are of frequent occurrence, and the walls of cisterns must necessarily crack, with the inevitable result, that percolation of foul matter from the surrounding soil must take place into them, and thus contaminate the water.

(*c*) Wells.

Besides private cisterns and the ordinary water supply of the City, there are also a large number of wells, the water of which is certainly of very bad quality. Some of these wells, in the corners of streets for example, have been covered over, and cannot therefore be used. Others, again, are on private premises, and the authorities cannot interfere with them. Many of the wells have been, from time to time, pumped out by the Board of Health, without any permanent benefit, as they refill with water very quickly. This measure is, accordingly, useless, and involves a waste of money.

Unwholesome water as a cause of disease.

Such serious diseases as " typhoid fever," " dysentery," " diarrhœa," " yellow fever," (and probably " bilious remittent fever "), as well as " cholera," are acknowledged to be water-borne diseases, and if people were made to understand that unwholesome water was a large factor in the production of some of our most fatal ailments, much benefit would be gained for the Country.

I would, therefore, recommend to His Excellency, the Governor, the advisability of the printing and distribution, chiefly amongst the lower and poorer classes of the community, of a few simple rules on this very important subject.

Under this head I would briefly refer to infantile mortality. I shall have occasion to speak more fully upon the matter when I come to consider the death-rate of the City. The number of deaths of infants for 1897 up to the age of 2 years was 70, out of a total of 115. Of this number, (70), 8 infants died of "malnutrition," and 21 of "diarrhœa." I maintain that these 29 deaths were due, firstly, to improper and ignorant feeding, and, secondly, to bad water. I would, therefore, recommend that a few suggestions on the feeding of young children be added to those I have mentioned above upon the subject of unwholesome water.

(E) The unhealthy portions of the City.

The most unhealthy parts of the City are, speaking broadly, the outlying portions, where poverty is rampant, and where dirty and filthy conditions of life are commonest. From charts appended to this Report, (vide charts A, B, & C) it will be seen at a glance that certain streets have had more cases of disease of various kinds than others; and I would remark that, of streets that run from East to West, it is chiefly the western extremity that is the unhealthiest. The reason for this difference is that in rainy weather this part of the City becomes swampy, and the soil remains water-logged, for a considerable period.

Drainage of damp localities by planting of palm trees.

I have, therefore, recommended to the Board of Health the advisability of planting in these damp districts such trees as would absorb moisture and drain the land (as palms of various sorts especially the "mountain cabbage palm"). The result would be not only picturesque from an artistic, but also beneficial, from a sanitary, point of view.

As I have been in active practice in St. John's since September 1895; I have thought that it would be of interest to His Excellency the Governor, if I went somewhat out of my way, and recorded my observations and statistics for the two years 1896 and 1897. I have accordingly devised a series of charts, in which I have represented these observations. The diagrams do not need any detailed explanation. Vide charts A, B, C and 1, 2, 3, 4 and 5.

My results, I regret to say, are not complete, as they represent solely my own experience, there being other medical practitioners in the City, whose statistics are not available.

(F) Number of cases treated in the Surgery.

The number of cases treated in the Surgery, under the terms of the Medical and Poor Relief Act of 1870, was 2,310 in the year 1896. Day visits to such patients have numbered 1,641, and night calls 53. Of course, attendance on, and visits to, private patients in the City and Country are not included in these figures. During the year 1897, the number of patients treated in the Surgery under the terms of the Medical and Poor Relief Act of 1870, was 4,405, the day visits were 1,545, and night visits 180.

(G) Explanation of Diagrams.

In Charts 1, 2, 3, 4 and 5, I have endeavoured to point out, in a graphic form, the healthy and unhealthy months of the year, and the comparison between the figures for the two years 1896 and 1897 may prove of interest. In these diagrams, and I refer only to Nos. 1, 2 and 3, I have contrived to get in the "rainfall," "dew-point," "temperature," and "prevailing winds" during each month, with a view of ascertaining, whether there is any connection or not between the prevalence of certain diseases, and the meteorological conditions existing at the time.

In Chart I, or that of "Fevers," it will be observed that the curves, indicating the rise and fall of the disease for each month of the two years 1896 and 1897, correspond fairly.

It will also be noticed that the highest "temperatures" recorded in 1896 are from April to October.

The "Dew Point" on the whole corresponds with the temperature.

With regard to 1897, the temperature is variable up to March; but from April to December the thermometer has registered high. Thus the temperature record for the two years is very similar.

It would be a difficult matter to decide, with meagre data, whether the direction of the prevailing winds has any bearing on the production of fevers. Certain winds are popularly regarded as "fever winds," and although "popular beliefs" are frequently misleading and exceedingly erroneous; still there are

(i Influence of winds on prevalence of diseases.

(a) Malarial fevers of simple type.

many that are based upon old traditions and the experience of ages, and that should not, therefore, be cast aside as unworthy of credence, or importance. The matter of "fever winds" comes under this category.

It is of interest to note that in February, of both years, the direction of the wind was East-north-East, and that in this month the number of "fever" cases was large, in both years. This, however, is probably a coincident. The influence of winds, accordingly, in the production of "fevers" must remain at present "sub judice," until sufficient data have been got together, extending over some length of time, to enable one to draw any definite conclusions from them.

(ii) Influence of rain-fall on prevalence of diseases.

The amount of rainfall would seem to cause some influence on the causation of this particular form of "fever" under consideration. The type to which this chart is devoted is "malarial fever," of the ordinary "intermittent form." But it would be impossible and unscientific to express an opinion as to the relationship between the prevalence of certain diseases and any meteorological conditions existing at the time, unless sufficient observations and facts were available. These charts have been framed with a view to that object.

(iii) Influence of temperature and dew point on prevalence of diseases.

(b) Pulmonary diseases.

Chart II. The red and black tracings in this chart, indicating the number of "pulmonary" cases for each month of 1896 and 1897, resemble each other more closely than those of Chart I., and I am inclined to think that the increase of cases corresponds with the increase of "temperature" and "dew point," which occurs between the months of April, May, and October or November. It would also appear that the increase of rainfall has a corresponding effect in the augumentation of cases of "pulmonary" trouble.

(c) Gastro-intestine diseases.

Chart III. The same remarks as have been made in referring to Chart II. appear applicable to the subject of "gastro-intestinal disorders," viz.: That a high "temperature," a high "dew-point," and an increase in the "rainfall" seem to increase the number of "gastro-intestinal diseases."

(d) Bilious remittent fever.

Chart IV. Owing to the few cases, I am glad to say, that have come under my care during 1896 and 1897, of "Bilious Remittent Fever," one of our most fatal fevers, I have not thought it worth while to encumber this Chart with a multitude of tracings and figures. But it will be seen that this disease, unlike ordinary "malarial fever" which occurs in numbers throughout the year, is most prevalent from April or May to October or November, and is, like the diseases considered in Charts II. and III., probably dependent for its existence, upon certain meteorological conditions. I do not think I would be wrong in asserting that this particular fever is to be met with in St. John's chiefly between the months of April and November.

(e) Typhoid fever.

Chart V. With regard to this Chart I do not think that any deductions as to any special reason for the prevalence of the disease can be drawn from its figures. I would say that it indicates that this dangerous type of fever may occur at any time of the year and under any conditions of climate. Considering the unwholesomeness of a large portion of the water-supply of the City, and the ignorance of the lower classes of the Community of the simplest rules of Hygiene, the wonder is that cases of "typhoid fever" are so, comparatively, few in number.

(H) Deductions drawn from charts.

The general deductions from the Charts are, speaking broadly, that: the unhealthiest months of the year, in St. John's, for "pulmonary" and "gastro-intestinal diseases" and "bilious remittent fevers," are the rainy and hot months, viz.: from April to November; that "typhoid fever" may prevail at any time; and that for fevers of a simple "malarial type," there seems to be no fixed period of season, numbers of cases being met with all throughout the year, though increase of rainfall would seem to cause an increase in the number of such cases.

In the last table I append to this Report I have shewn the number of deaths from all causes and at all ages in St. John's, for the years 1896 and 1897, taken from my own books. There will, of course, be a difference between my figures and those of the Registrar General, the difference being accounted for by the fact that there are other medical men, besides myself, who are practising in the City.

(I) Consideration of mortality table.

The death-rate for 1896 was 39 out of a population of 9,738 which is equal to ·40 per cent.

(a) Death rate.

The death-rate for 1897 was 115, which is equal to 1·18 per cent. of the population.

Of the total number of deaths for each year, I regret to say that that of infants under 2 years proved a large item, the number for 1896 having been 10 and that for 1897 twenty-one (21), the cause of death having been "bowel-disorder." In connection with "bowel-disorder" I must consider the term "malnutrition," mentioned as a cause of death in the chart.

(b) High infant mortality

Most of these cases have originally risen from *improper dieting,* due to ignorance, on the part of the mothers, of infant nursing. In many instances the mother is a labourer, miserably poor, and entirely dependent for her food upon the few pence she could earn on some estate. Soon after the birth of her child she has to go out to her work, so as to be able to procure her meagre meal—and such a meal for a nursing mother! The wonder is that more children do not die, of the poorer classes! The mother, having to go out to her work, must necessarily leave her child ill-cared for. As a matter of fact, the infant is left either to the care of a half-starving child of tender years, or to that of a tottering old woman. A bowl of arrowroot, or "tous-les-mois," sweetened with dirty brown sugar or molasses, is left with the "nurse," to be stuffed into the infant's stomach, whenever the little urchin might cry. The result of this feeding can produce only one result: 1. indigestion (for an infant cannot digest starchy foods under about 4 months), 2. diarrhœa, and, 3rdly, (unless the little unfortunate receives timely aid), DEATH!

(c) Causes of high infant mortality.

(i) Improper feeding.

I wish it to be understood that I am not drawing here an imaginary picture of "Infant Life Amongst the Negroes of the West Indies." The description I have given above has arisen from a personal experience of many years. The cases that chiefly disclose maternal neglect or cruelty are those of Illegitism, where the father of the infant ignores it and denies its paternity, thus leaving the unfortunate and poverty-stricken mother to deal, as best she might, with her burden of sorrow and regret.

The next item that I would refer to in my death-chart is that of "trismus," or the "tetanus of the new-born," the number of which for 1897 was 11. I had had no cases in the previous year.

I am of opinion that this disease is principally caused by improper treatment of the "navel" of new-born infants by unqualified and ignorant women who act in the capacity of midwives. The dressing of the "navel" should be entirely antiseptic, but unless a midwife is trained and taught in this system of antiseptic treatment of wounds, she not only cannot be of any benefit to the Public, but may be a source of danger. Unfortunately, there are several of these untrained and ignorant women in St. John's, who attend to child-birth cases, and I may say that the majority of these "trismus" cases have occurred under their management.

(ii) Wrong treatment at birth.

I would strongly recommend to the Government that none but properly trained and duly certificated nurses, appointed by the Government, be allowed to act as midwives, not only in the city of St. John, but throughout the Country Parishes.

In concluding this report I feel that I should explain what meaning I attach to some of the terms I have used in my death-table, as indicating the causes of death.

(J) Explanation of names in mortality table.

The term "debility" comprises two sets of cases, viz: that of infants under 6 months, of which there have been 7 in 1897, and that of old people, of which there have been 8 in 1897 and 1 in 1896. The former class of cases I consider to be the result of the impoverished and ill-fed condition of the mothers, who are compelled to work for their daily bread, under most adverse circumstances. The children, born of these women are puny and delicate, and possess but little vitality or power of resisting the slightest disease. The latter class of cases comes under the category of "senile debility" or the natural failure of strength, and the ebbing away of Life, without any apparent cause.

Heart diseases reckon amongst its victims 12 cases for the two years, all, with the exception of one, in which there was a malformation of the organ from birth, having been found in adults. Heart diseases amongst adults, of both sexes, I find to be very commonly met with in these islands, and I attribute their causation to two sources, viz: (1) hard and heavy field work, and (2) exposure to damp and wet weather, while in the performance of their work. The next largest item in my "table of deaths" is to be found under "Bronchitis".

One adult succumbed to the disease, all the other cases, 21 in number, being infants under 4 years of age. Of this number 15 fatal cases occurred in 1897.

Pulmonary diseases have been very prevalent during 1897 (vide table C.), and when this particular form of disease is common, the general rule is that the largest fatality occurs in the two extremes of life, viz: amongst "young children" and "old people." But in this instance, the former class were the chief sufferers.

GEORGE E. PIEREZ, M.D. Edin.

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